Fill	in this information to i	dentify your ca	ase:						
Deb	otor 1	Tamara Lynı	n Scott						
1	otor 2								
Uni	ted States Bankruptcy	Court for the	WESTERN DISTRICT	OF TENNESSEE					
Cas	se number 17-23	3910			Che	ck if this is:			
(If kn	nown)				 <i> </i>	An amended filing			
					☐ A supplement showing postpetition chapt 13 income as of the following date:				
	fficial Form 1				Ī	MM / DD/ YYYY			
So	chedule I: Y	our Inco	ome			12/15			
supp	plying correct inforn use. If you are separ ch a separate sheet	nation. If you ated and you	are married and not filir r spouse is not filing wi	ng jointly, and your spouse is li th you, do not include informat	ving with ion abou	otor 2), both are equally responsible for n you, include information about your nt your spouse. If more space is needed, number (if known). Answer every question			
1.	Fill in your employ information.	ment		Debtor 1		Debtor 2 or non-filing spouse			
	If you have more that	an one job,		■ Employed		■ Employed			
	attach a separate pa		Employment status	☐ Not employed		☐ Not employed			
	employers.		Occupation	brazier		production worker			
	Include part-time, seasonal, or self-employed work.		Employer's name	Carrier		Glastel			
	Occupation may incor homemaker, if it a		Employer's address	97 Byhalia Rd Collierville, TN 38017					

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

18 yrs

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. Solution 2. Solution 3. 4. Calculate gross Income. Add line 2 + line 3.

How long employed there?

			n	non-filing spouse				
2.	\$	4,429.62	\$		1,733.33			
3.	+\$	0.00	+9	5	0.00			
4.	\$	4,429.62		\$	1,733.33			

For Debtor 1

10 yrs

For Debtor 2 or

Deb	tor 1	Tamara Lynn Scott	_	C	Case n	umber (<i>if ki</i>	nown)	17-23	3910		
						Debtor 1			Debtor 2 -filing sp		
	Cop	y line 4 here	4.		\$	4,429	9.62	\$	1,7	733.33	=
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.		\$ \$ \$ \$ \$ \$ \$ \$	582 (5.80 0.00 0.00 0.00 2.27 0.00 0.00	\$ \$ \$ \$ \$ \$ 		0.00 0.00 0.00 0.00 0.00 0.00 0.00	- - - -
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	1,098		· •—		0.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$	3,331		\$	17	733.33	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$		0.00	\$		0.00	-
	8b.	Interest and dividends	8b		\$		0.00	\$		0.00	_
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.		\$ \$ \$ \$	(0.00	\$ \$ \$		0.00 0.00 0.00	-
	8g.	Pension or retirement income	8g.		\$		0.00	\$		0.00	_
	8h.	Other monthly income. Specify: aid from family	_ 8h	.+	\$	250	0.00	+ \$		0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	250	0.00	\$		0.0	0
	Add Stat	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. the all other regular contributions to the expenses that you list in Schedule add contributions from an unmarried partner, members of your household, your				,581.55			733.33	= \$	5,314.88
	othe Do i	er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	•					,	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$Combin	5,314.88 ned y income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								y income
		Yes. Explain: client's job is at a peak season right now. Her hu He has tried to contact Donald Trump about this.		nd	's jol	o is dow	n an	d may	be sen	nt to M	exico.

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:						
Deb	otor 1	Tamara Lyni	n Scott			Ch	eck if this An am	s is: ended filing	
	otor 2 ouse, if filing)								ving postpetition chapter the following date:
` .	, ,,								
Unit	ted States Bankı	ruptcy Court for the	: WESTE	ERN DISTRICT OF TENNE	ESSEE		MM / D	D / YYYY	
	nown)	7-23910							
0	fficial Fo	orm 106J							
		J: Your							12/1
info	ormation. If m	and accurate as nore space is ne n). Answer eve	eded, atta	If two married people ar ch another sheet to this n.	e filing together, bo form. On the top of	oth are eq any addi	ually res tional pa	sponsible fo ges, write y	or supplying correct your name and case
Par 1.	t 1: Desci	ribe Your House nt case?	ehold						
	■ No. Go to	o line 2.	in a separ	ate household?					
	□N	lo		al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De _l	pendent's	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.			Daughter		5		Yes
					Daughter		7		□ No ■ Yes
					_				□ No
					Son		12		■ Yes □ No
									☐ Yes
3.	expenses o	penses include of people other t d your depende	han \square	No Yes					
exp	imate your ex	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this follower that the second s	orm as a s J, check	supplements	ent in a Cha at the top o	pter 13 case to report f the form and fill in the
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
4.	The rental of	or home owners		ses for your residence.	nclude first mortgage	e 4.	\$		0.00
	. ,	nd any rent for th	e ground c	ii iOt.		••	-		
	If not includ	ded in line 4:							
		estate taxes	e or rootes	'e ineurance		4a. 4b.			0.00
	•	erty, homeowner's e maintenance, re		's insurance ipkeep expenses		4b. 4c.			0.00
_	4d. Home	owner's associa	tion or con	dominium dues		4d.	\$		0.00
5.	Additional r	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00

Debtor	1 <u>T</u>	amara Lynn Scott	Case num	ber (if known)	17-23910
. Ut	ilities	:			
6a	. E	lectricity, heat, natural gas	6a.	\$	400.00
6b	. V	/ater, sewer, garbage collection	6b.	\$	50.00
6c	. Т	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
6d	l. O	ther. Specify: Internet	6d.	\$	80.00
Fo	od a	nd housekeeping supplies		\$	600.00
Ch	nildca	re and children's education costs	8.	\$	0.00
CI	othin	g, laundry, and dry cleaning	9.	\$	200.00
. Pe	erson	al care products and services	10.	\$	150.00
. Ме	edica	and dental expenses	11.	\$	120.00
. Tr	ansp	ortation. Include gas, maintenance, bus or train fare.		_	
Do	not i	nclude car payments.	12.	·	350.00
		inment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
. Cr	narita	ble contributions and religious donations	14.	\$	100.00
	suran				
		nclude insurance deducted from your pay or included in lines 4 or 20.		•	
		fe insurance	15a.	·	0.00
_		ealth insurance	15b.		0.00
		ehicle insurance	15c.	·	297.00
		ther insurance. Specify:	15d.	\$	0.00
		Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	ecify:	nent or lease payments:		Φ	0.00
		ar payments for Vehicle 1	17a.	\$	0.00
		ar payments for Vehicle 2	17b.	·	0.00
		ther. Specify: Husband's car note	17c.	·	440.00
		ther. Specify: proposed car note outside plan	— 17d.		390.00
		syments of alimony, maintenance, and support that you did not report as			
		ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
		ayments you make to support others who do not live with you.		\$	0.00
Sp	ecify:		19.		
		eal property expenses not included in lines 4 or 5 of this form or on Sche			
20	a. M	lortgages on other property	20a.	\$	0.00
20	b. R	eal estate taxes	20b.		0.00
20	c. P	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
		laintenance, repair, and upkeep expenses	20d.	·	0.00
20	e. H	omeowner's association or condominium dues	20e.	\$	0.00
. Ot	her: S	Specify: daycare	21.	+\$	280.00
Ca	alcula	te your monthly expenses			
		d lines 4 through 21.		\$	3,907.00
		py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,307.00
				\$ ———	2 007 00
22	.c. Ad	d line 22a and 22b. The result is your monthly expenses.		Φ	3,907.00
		te your monthly net income.			
		opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,314.88
23	b. C	opy your monthly expenses from line 22c above.	23b.	-\$	3,907.00
_					
23		ubtract your monthly expenses from your monthly income.	23c.	\$	1,407.88
	- 1	he result is your monthly net income.	200.	T	.,
1. Do	you	expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
Fo	r exam	nple, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of
_		ion to the terms of your mortgage?			
	No.				
	Yes.	Explain here:			